AREPORT

UPON THE

Public Health of the Borough of Great Yarmouth,

FOR THE YEAR 1883,

COMPRISING SOME PARTICULARS OF

OF DEATH & LOCALITIES OF ZYMOTICS;

TOGETHER WITH

The Numbers and Characters of the various Nusiances abated and a short account of the more

IMPORTANT SANITARY MATTERS

DEALT WITH BY THE U.S.A., BY

JOHN BATELY, L.R.C.P., LOND., &C.,

Medical Officer of Health and Medical Superintendent of the Urban Sanitary Authority's Infectious Diseases Hospital.

Printed by Order of the Sanitary Committee of the Corporation.

Great Narmouth:

J. COOPER & SON, STEAM PRINTERS, HALL PLAIN.

1884.

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

TO THE GREAT YARMOUTH URBAN SANITARY AUTHORITY.

GENTLEMEN,

The following is my report upon the health of the Borough, for the year 1883.

I estimate the Population, on the 30th of last June, to have numbered 47,202 persons, and by the end of the year, this number had probably increased to 47,421.

During the fifty-two weeks ending the 29th of last December, there were registered within this Borough 1564 Births, and 904 Deaths.

These figures applied to the estimated population for the middle of last year give the following results:

33.13 per 1000 as the Birth rate.

19.17 .. Death rate.

13.96 ,, Rate of increase.

With the exception of 1879, this is the lowest death rate I have yet recorded, and I take it as good evidence of the utility of your Sanitary work.

The death rate throughout England and Wales, has been declining for several years past, and it will undoubtedly continue doing so whilst sanitation progress. Last year it was 19.5, and with the single exception of 1881, was lower than that recorded in any year since 1837.

The following figures relating to Yarmouth are of considerable interest. They indicate the state of the public health during the last nine years.

1875, 1876, 1877, 1878, 1879, 1880, 1881, 1882, 1883, No. of births 1434 1490 1490 1553 1568 1561 1580 1525 No. of deaths 1036 920 900 1057 830 959 889 953 904 Birth rate 31.8 32.53 31.93 32.69 32.32 31.53 34.18 32.45 33.13 23.02 20.01 19.29 22.25 17.11 19.37 19.23 20.28 19.17 Death rate Rate of increase 8.7 12.45 12.64 10.44 15.21 12.16 14.95 12.17 13.96 Zymotic deaths 201 155 109 147 79 173 114 134 66 Ditto, death rate 4.6 3.3 2.3 3.07 1.60 3.49 2.46 2.85 1.42

The Great Yarmouth School Board, about the middle of last year, caused a census of all the children living within the Borough to be taken, and I am, by this, enabled to give you some interesting and important facts, in relation to the mortality among children during 1883.

SUMMARY OF SCHOOL BOARD CENSUS.

Number	and	ages	of	Children.
--------	-----	------	----	-----------

tal.	
53	
16	
3,747	
14	
060	
1,327	
217	
3	

By grouping the wards into the several districts they form parts of, and applying the number of children's deaths registered in each district, to the juvenile population thus obtained, something rather startling appears in the shape of very unequal death-rates.

Districts.	Children—	Population.	No. of Deaths.	Death Rate per 1000.		
North	Under 5	2721	138	50.71		
NOPUL	5 to 14	3069	13	4.23		
Q	Under 5	2475	116	46.86		
South	5 to 14	2599	7	2.69		
Gorleston and	Under 5	1655	64	38.67		
Southtown	5 to 14	1698	10	5.88		

These figures most conclusively indicate a very large mortality among infants and young children, and they further prove the conditions of infant life, in the North district, to be worse there than in either of the other two localities. Infantile life has a much better chance in Gorleston than in Yarmouth.

The entire mortality of the several districts give deathrates likewise varying, viz.:—

North District	20.79
South District	18.75
Gorieston & Southtown	16.27

The salubrity of the north district, even for adult life, is far from satisfactory, and the figures given above fully bear out, as far as it is possible for them to do, the inferences one draws from the infants' death-rate. Although the smallness of the general death-rate (19.17) for the whole Borough is a matter for congratulation, still the figures I have just called your attention to clearly demonstrate the great need there is for some action, sanitary or philantropic—probably both combined, to stem this terrible tide of infant mortality.

Public Sanitation may do a great deal, but to ameliorate the conditions more particularly damaging to the health of babes and young children, their dwellings and all that surround them there, must be earnestly dealt with.

Many of the houses occupied by the poorer classes, more especially in the rows, need improvement or demolition. In olden times when the town was strictly included within its walls, some very commodious houses were built in the narrow streets, and even in the rows. Later on other houses in more eligible situations tempted the better class of inhabitants to vacate these abodes, leaving them to be divided, and sub-divided into any number of tenements, to suit more humble occupants. And it so comes about that we have now a quantity of property, somewhat difficult to deal with, on account of the multiplicity of owners, and the overlapped and mixed up positions of the Not only are these dwellings cramped, premises. crowded, and delapitated, but the tenants themselves are apparently quite indifferent to the more ordinary conditions of healthful existence.

The "Table of Deaths" on pages 8 and 9 deserves a careful perusal. You will probably notice the small number of deaths from Diarrhæa as compared with former years. I am glad to note the fact, but in this town the disease, as a cause of death, re-appears so constantly every summer, that I can hardly take its lessened mortality of last year as evidence of the malady dying out. Unquestionably the better cleansing the town is subject to now-adays, tends to lessen the mortality of all diseases, and none more so than Diarrhæa, but yet there are still some undiscovered influences at work in this place which must be searched out and remedied before we can hope to be rid of the scourge.

Measles, causing death, was entirely absent last year, and Scarlet Fever was very slight, but unfortunately Croup was very distructive.

Sir Thomas Watson, one of our most reliable medical authorities, says "true CROUP is not at all contagious, although it is found sometimes existing at the same time, or in quick succession, in more than one child of the same family. It frequently occurs sporadically, but there are places in which the disease appears to be endemic. Cold situations—and damp places, more than such as are merely cold—are subject to the prevalence of this disease. It is accordingly more frequent in the seasons of winter and spring. It is said to be most common near the sea-shore, and in the neighbourhood of large bodies of water generally. It occurs in low, moist districts, oftener than in upland situations that are more exposed to cold winds. Towns situated on the banks of rivers have more than the average share of it. It has been observed to be particularly frequent among the children of washerwomen in such places, and thus evidently connected with exposure to moisture. In towns so situated, it has been known to prevail epidemically after an inunda-Dr. Alison has made a very curious remark respecting it. He says 'it seems to be often produced by the child sitting or sleeping in a room newly washed, and that he has noticed its frequent occurrence on a Saturday night—the only day in the week on which it is customary for the lower orders in Edinburgh to wash their houses." Dr. Tanner likewise says "Croup is most prevalent in low moist localities, and especially perhaps after the long continuance of heavy rains, with east or north-east winds."

TABLE OF

During the year 1882, in the Urban Sanitary District of Great LOCALITIES, and showing also the Population of

	Populati Ag	on at all es.		Mortality from all causes, at subjoined ages.									
Names of Localities adopted for the purpose of these Statistics.	Census 1881.	Estimated to middle of 1883,	Registered Births.	At all ages.	Under 1 year,	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 60.	60 and upwards.			
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.			
NORTH DISTRICT SOUTH DISTRICT	20,612	20,826	655 558	433	95	43 25	15	20	98	98			
Gorleston and }	9,001	9,529	351	155	46	18	11	7	29	44			
TOTALS	46,214	47,202	1,564	904	232	86	35	41	206	304			

Area in Acres of the District to which the above table relates is 3685.

Inhabitants per house at the Census of 1881, was, in Yarmouth

4.5; in Gorleston 4.6.

Inasmuch as the Census was taken at a period of the year when the town contained but its normal population, the above figures, as far as Yarmouth itself is concerned, should be materially increased, probably to the extent of half as much again, to represent the state of affairs during the visiting season.

DEATHS.

Yarmouth, classified according to DISEASES, AGES, and such Localities, and the Births therein during the year.

Mortality from subjoined causes, distinguishing Deaths of Children under Five Years of age.																					
	Smallpox,	Measles.	Scar!atina.	Diphtheria.	Croup (not "spasmodic.")	Whooping Cough.		Enteric or Typhoid.		Diarrhea and Dysentery.	Cholera.	Rheumatic Fever.	Erysipelas.	Pyænia.	Pueperal Fever.	Ague.	Phthsis.	Bronchitis, Pneu- monia and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.
12.	13.	14.	15.	16.	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	28.	2 9.	30.	31.	32	33.
Under 5 5 upwds. Under 5 5 upwds.			0 1 0 1	1 1 2 0	10 2 3 2	8 0	_	0 3	1 0	15 3 12 3			_ _ 1 2				1 26 1 29	22 37 18 31	0 22 0 19	0 15 3 12	81 184 74
Under 5			1 0	0 1	8 3		_ _ _			8 0				_ 	_		0 12	5 6	0 10	0 4	98 42 55
Under 5	_	_	1 2	3 2	21 7	9	 	1 6	1 0	35 6		_ _	1 2	_	_	_ _	2 67	45 74	0 51	3 31	197 337

In Gorleston, a large proportion of the houses have been recently erected, each with good yard space or garden, and with proper attention to Sanitary matters.—In Yarmouth, rather the reverse of all this obtains.

I make these quotations to show that although Croup may not be an infectious throat disease as Scarlet Fever or Diphtheria, still it is a disease very much influenced by the sanitary condition of the house or locality in which it occurs.

Croup may be associated with Diphtheria and frequently is, especially where the eminations of foul drains, or the consumption of impure drinking water, have deteriorated the patients' health prior to the onset of Croup. These cases are described as Diphtheritic Croup, and in almost all instances sanitary defects are discovered in the homes the disease visits.

The localities in which the deaths from Zymotic diseases occurred, are as follows:—

Those from Diarrhea.

2, Byron Terrace
Row 139 (2 cases)

Boreham Road
40, Ipswich Place
Row 93
7, Trinity Place
91, Middlegate Street
13, Audley Street
Row 99
5. St. Parl's Torrace
62, St. Coorreis Road

5, St. Paul's Terrace 63, St. George's Road 5, Bessey's Buildings Row 120 North Denes Row 31

North Denes Row 31
47, North Howard Street Row 134
2, Priory Plain Nelson I

, Priory Plain Nelson Road, Gorleston (2 cases)

9 King Street Trafalgar Road

59, King Street Trafalgar Road, ,,
Row 140 Beccles Road, ,,
Southtown Pier Walk, ,,
48, Charlotte Street Harfrey's Farm, ,,

Row 10 Common Lane, ,, 12, Tottenham Street

Those from Whooping Cough.

Cobholm Terrace Maud Terrace (2 cases)
Row 47 Cemetery Road

Bath Hill 52, Florence Place

Row 9 (2 cases)

Those from Typhoid Fever.		
Well Opening North Quay		
78, Middlegate Street 2, Boreham Road		
Row 61 Row 74		
Row 34		
Those from Diphtheria.		
12, King Street 143, Middlegate St.	reet	
7, North Denes Terrace 30, Alma Road		
Stradbroke Road		
Those from Scarlet Fever.		
Bell's Road, Gorleston North Denes		
Row 109		
SANITARY WORK.		
NUISANCE REMOVAL.		
Total number attended to by Inspector		689
Remedied by Inspector's notice only	• • •	422
Referred to the Town Clerk to take proceeding	gs	267
viz. (a) To reconstruct and otherwise re	pair	
privies	• • •	60
(b) To construct new drains, to repair	and	
cleanse old ones, and to cleanse	and	
trap cesspools	•••	56
(c) To close impure water wells	***	31
(d) To put up water troughing	0 t C	27
(e) To remove manure, discontinue keep	ping	
pigs, &c		23
(f) To channel and make up road	•••	16
(g) To provide water supply		16
(h) To re-lay back yards, passages, &c.	• • •	11
(i) To repair cellar doors, &c.		5
(j) To repair and remove muck bins	•••	2
(k) To cleanse and repair W.C.'s, rain w	ater	
cisterns, limewash premises, &c.	• • •	20

The most important of your sanitary operations last vear was the commencement of the Sewage Work-the taking up of many miles of old drains, and laying in their stead and in better position new glazed pipes; rectifying more recent ones; and cleaning out and ventilating the mains, which were otherwise satisfactory. The work is still going on and will be completed before the summer visitors come. I have paid considerable attention to the work in its progress, and some of the revelations the necessary excavations have made, have very much surprised me. Some of the old brick drains had no flooring to them at all. They were merely trenches with bricks on each side and above them. Old oak planks were in some places found in lieu of bricks. These antiquated sewers seemed designed merely to receive the drainage underground, and then let it soak away as it could; evidently the conveyance of sewage to any distance was their last intention. Many of the brick barrel drains were found perfectly rotten in their under parts, and allowing the sewage to percolate into the ground beneath almost as freely as if they had no bottoms at all. The tops of many of these drains when first uncovered looked good and sound, but when broken into their defects became obvious. Small roots from the trees on the quay had grown through the sides of the sewers lying near them, and assisted in obstructing the sewage. Everywhere the rats had free warren; thousands of them had been killed and driven out. These old drains were patched and bodged in every possible manner. All sorts of sizes and constructions were sometimes found in the course of one continuous 'Twas no uncommon thing to find a drain falling the wrong way; but in this fault the old ones are not peculiar. Something very like the billowy surface of the sea had been imparted to the levels of many of the drains

in this town, but with this unfortunate mistake—the outfall of the drain was at the top of the wave. In an old drain on the South quay, the contents had to mount up fifteen inches before it could flow out. In a house served by this drain some Diphtheria deaths occurred a few years ago. The outlet of a drain on the Hall quay had been blocked apparently for years, and the filth was completely shut up in this "elongated cesspool."

Of course when these drains were laid, Sanitation was not understood, and no care was taken to protect the subsoil from contamination with sewage, hence it is that nearly all the spring water in Yarmouth is more or less spoilt by it. But I hear of many drains of recent date just as faulty as the old ones, and this is all the more reprehensible inasmuch as sanitary considerations have been ruthlessly ignored, and the most culpable scamping practised. What think you of modern pipe drains ending in the sand! House drains not long enough to reach the sewer! tilators only such in external appearances! Can anyone be surprised that we get sickness and fevers? I verily believe that the ebbing and flowing of the tide through our sandy subsoil washes away a great deal of impurity, and we are much indebted to these forces of nature for the health we possess.

By virtue of the "Factory and Workshops Act, 1883," and the "Merchant Shipping (Fishing Boats) Act, 1883," considerable and important additional duties have been, during the past year, entrusted to your Sanitary officers.

For some of the purposes of the first-named Act, a visitation of the hakehouses within the borough is being carried out, and in several of those already inspected, serious sanitary defects have been discovered—

drains and privies and other nuisances, have been found in the most objectionable places, and where the act says they should not be. All such cases have been reported to you, and the necessary action has been taken to ensure their removal.

The clauses of the Fishing Boats Act, relating to deaths at sea, and the sanitary condition of seamen's lodging houses are excellent. But for the purpose of correcting the vital statistics of the towns and villages supplying fishermen, some arrangement seems desirable, whereby the deaths of such persons "lost at sea," can be included in the mortality returns of the places their homes are located in. They are so many units taken from the population of their locality, and their deaths should somehow be accounted for in that locality. A fisherman is more of a landsman than an ordinary sailor. He is frequently in and out of port, and, in the case of the drift-net fisherman especially, spends many months of the year on shore, generally on employment totally distinct from the fishing.

In the case of a dead body being brought on shore, the death is registered in the district into which the body is brought, and the Registrar reports it to the Medical Officer of Health. But in order to bring into account the deaths of those whose bodies are lost at sea, for the purpose I have in view, it would be sufficient if the superintendent of Mercantile Marine reported to the Medical Officer of Health, once a year, all cases of death at sea brought to his knowledge, pursuant to sec. 44 of the Fishing Boats Act, indicating the age and domicile of each deceased.

As to the houses in which fishermen are lodged, the Fishing Boats Act gives the Sanitary Authority power to

make bye-laws and regulations for their inspection, licensing, cleanliness, proper and orderly conduct, &c, &c., and I commend to your consideration the model bye-laws issued by the Board of Trade, in connection with the Payment of Wages and Rating Act of 1880.

I have seen a great deal of the insides of various houses in which single smacksmen and lads are lodged. Very few of them are kept in a satisfactory condition, or in an orderly manner. By far the most of them are kept by women of very questionable character, who receive a large portion of their lodger's wages while the latter are at sea, and leave but little for the men themselves to take when they return home. Indeed the place they return to is hardly worth the name of home. It frequently is a cottage in a disreputable locality, surrounded with others of a similar class, over-crowded at night, and dirty and filthy all the year round. I need not particularize here the nuisances I found on the various premises I have visited. The sanitary and moral aspect of the whole scene is most disgusting, and I hope ere long to see the bye-laws authorised by the Fishing Boats Act, in operation in this borough.

In July last, in consequence of the outbreak of Cholera in Egypt, the Local Government Board issued an order directing that certain provisions be made by the Sanitary Authorities along the coast, in anticipation of Cholera reaching our shores. Inasmuch as your Infectious Diseases Hospital is situated conveniently near the beach, and always ready for the reception of patients, you had very little else to do, under the said order, beyond appointing a place for the detention of suspected vessels. One vessel only was stopped there, and in that case the suspicion was ill founded.

Although the Customs port of Yarmouth extends from Sparrow Gap near Sherringham to Hopton Score, and three miles seaward all along the coast between these two places, the Cholera order indicates, for the purposes of that order only "so much of the Customs port abutting on an Urban or Rural Sanitary district as is nearer to such district than to any other, and is not included within the jurisdiction of any Port Sanitary Authority, shall be deemed to be within such district," which practically in so far as this place is concerned, limits your action under the Cholera order to Yarmouth Roads and Harbour. Had a Port Sanitary Authority been in existence here the duty would have devolved upon that Board.

Another order dated 1st August, 1883, authorising the disinfection or destruction of Rags imported from Egypt, was sent you by the Local Government Board. Nothing occurred to call for any interference under this order.

The freedom of the town last year from any considerable amount of infectious disease accounts for the small use made of The Infectious Disease Hospital, only four cases, and these of very trivial character where received there; they all recovered.

In the near future may I invite you to take into your consideration The Paving and Re-channelling of the Rows? Several of them through which a large traffic passes, are paved either wholly or in part, with flagstones or concrete; and wherever this has been done, the property on either side has been improved by repair, or, in many instances, rebuilding. I consider this question an important Sanitary one. There can be but one opinion, as to the more cleanly and wholesome appearance,

of paths and passages covered with concrete. Were the rows so treated a double sanitary benefit would be effected, for not only would the thoroughfares themselves be rendered more pleasant, but their amendment, by giving easier access to the wretched dwellings to be found in some of them, would conduce to their improvement as well. The labouring classes must live near their work which is to a large extent in the thick and bustle of the town, and whatever can be done to insure the salubrity of their homes should be insisted upon.

In conclusion I respectfully tender my thanks for the many courtesies I have received from you and your officers.

And am, Gentlemen,
Your obedient Servant,
JOHN BATELY.

